Hadaatha Dana	Della New Asta 540		U.S. Pa	itent and Trader	oved for use through	gh 06/30/2010. DEPARTMENT (OF COMMERCE	
Under the Pape	to respond to a colle	respond to a collection of information unless it displays a valid OMB control number Complete if Known						
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			. Application N				-Conf. #4953	
FEE TRANSMITTAL			Filing Date			August 22, 2005		
For FY 2009			First Named	First Named Inventor		Taro YOSHIDA		
	Examiner Nar	Examiner Name L. B		B. Kiliman				
Applicant c	Art Unit	1794						
TOTAL AMOUNT C	Attorney Dock	cet No.	o. 0283-0205PUS1					
METHOD OF P	AYMENT (check all	that apply)					A	
For the ab	unt Deposit Account Num	ber: 02-2448 account, the Director	Depo	er (please identi osit Account Nam Tized to: (che	e: Birch, Stewa	art, Kolasch & y)	Birch, LLP	
Chai	rge fee(s) indicated be rge any additional fee(s) under 37 CFR 1.16	s) or underpayments	.,	arge fee(s) in dit any overp	dicated below, ayments	except for the	ne filing fee	
FEE CALCULA	TION						<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
BASIC FILING, Application Type			EARCH FEES Small Entit (\$) Fee (\$)		NATION FEE Small Entity Fee (\$)	<u></u>	Paid (\$)	
Utility	330	165 540		220	110	rees r	aiu (φ)	
Design	220	110 100		140	70			
Plant	220	110 330		170	85		***************************************	
Reissue	330	165 540		650	325			
Provisional	220	110	0	0	0			
	0 (including Reissues claim over 3 (including					Fee (\$) 52 220 390	Small Entity Fee (\$) 26 110 195	
Total Claims	Extra Claims	Fee (\$)	ee Paid (\$)	Multiple Depen				
		=	1.1	Fee (\$)		Fee Paid (\$	'	
Indep. Claims	of total claims paid for, if g Extra Claims r HP = x		Fee Paid (\$)					
3. APPLICATION S If the specification listings under sheets or fraction Total Sheets	n and drawings excee 37 CFR 1.52(e)), the ion thereof. See 35 U Extra Sheets 100 =	od 100 sheets of paper application size fee d S.C. 41(a)(1)(G) and Number of each 1/50 = e (no small entity disc 251 Extension for re	ue is \$270 (\$135 137 CFR 1.16(s) additional 50 or fr (round up to a w count) esponse within	5 for small end). **action thereo **hole number) first month	ntity) for each	additional 50 Fee F Fees I	Paid (\$) Paid (\$) 0.00	
	18	306 Submission of a	an Information	Disclosure	Statement	180	0.00	
SUBMITTED BY	(A A		Poglatedia - No	2	1			
Signature	meffere	20	Registration No. (Attorney/Agent)	36,623	Telephone	(858) 356-5959		
Name (Print/Type) M	lark J. Nuell				Date	June 3.	2009	